

<b>REVOCATION OF POWER OF                  ATTORNEY WITH                  NEW POWER OF ATTORNEY                  AND                  CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/019,341
	Filing Date	May 3, 2002
	First Named Inventor	Michael R. Hayden
	Art Unit	1836
	Examiner Name	Jennifer Ann Dunston
	Attorney Docket Number	SMAR-1-0101(2310-001-03)

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number: 25315

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 25315

**OR**

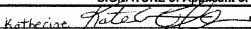
<input checked="" type="checkbox"/> Firm or Individual Name	Jeffrey J. King, Esq.		
Address	BLACK LOWE & GRAHAM PLLC 701 Fifth Avenue Suite 4800		
City	Seattle	State	WA Zip 98104
Country	USA		
Telephone	(208) 381-3300	Email	

**I am the:**

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Katherine Julie Diane Asbourne Excoffon		
Date	8/15/07	Telephone	314-335-7903

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22315-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**REVOCATION OF POWER OF  
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AND  
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Application Number	10/019,341
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First Named Inventor	Michael R. Hayden
Art Unit	1635
Examiner Name	Jennifer Ann Dunston
Attorney Docket Number	SMAR-1-0101(2310-001-03)

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**OR**

☒ Firm or  
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Signature

Name

Michael R. Hayden

Date

AUG 15 2007

Telephone

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**SIGNATURE of Applicant or Assignee of Record**

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August 17, 2007

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